

Covid-19 Response Plan

General Management of COVID-19 in Grace Park ETNS:

The Board of Management of Grace Park ETNS aims to facilitate the resumption of school based teaching and learning and the return to the workplace of staff. The return to the workplace must be done safely and in strict adherence to the public health advice and any guidance issued by the Department of Education.

Details for the safe reopening of Grace Park ETNS and the applicable controls are outlined in this document.

Before reopening Grace Park ETNS for the 2020/21 school year Grace Park ETNS has put the following processes in place:

- arrangements to keep up to date with public health advice, changes to any government plans for the safe reopening of society and Department of Education updates
- arrangements to pass on this information in a timely manner to staff, pupils, parents and others as required
- ensured that staff have reviewed the [training materials](#) provided by the Department of Education
- provided staff with access to the Return to Work (RTW) form
- identified a [Lead Worker Representative](#)
- displayed [posters and other signage](#) to prevent introduction and spread of COVID-19
- made the necessary [changes to the school or classroom layout if necessary to support the redesign of classrooms to support physical distancing](#)
- removed unnecessary clutter to facilitate ongoing cleaning of the school taking into account the importance of having educational materials to create a stimulating learning environment
- updated the health and safety [risk assessment](#)
- made necessary arrangements to limit access to the school to necessary visitors and [maintain records of contacts to the school](#)
- reviewed the school buildings to check the following:
 - does the water system need flushing at outlets following low usage to prevent [Legionella disease?](#)
 - has school equipment and mechanical ventilation been checked for signs of deterioration or damage before being used again?
 - have bin collections and other essential services resumed?

There are checklists in place to assist schools on the details of what is needed for these arrangements in [the Appendices of this plan.](#)

Additional Measures for Supporting Children with Special Educational Needs

The School COVID-19 Response Plan recognises that additional consideration is required to support children with special educational needs and the staff who engage with them. These considerations are referenced in the HPSC advice on the Re-opening of Schools (June 2020).

These include: For children with special educational needs (SEN) maintaining physical distancing in many instances will not be practical or appropriate to implement. The focus should therefore be on emphasising that parents/guardians should have a heightened awareness of signs, symptoms or changes in baseline which suggests illness/COVID-19 infection and where symptoms are present children should not attend school. A precautionary approach should be taken. Similarly staff should be aware of their responsibility not to attend work if they develop signs or symptoms of respiratory illness. A precautionary approach should be taken.

Hand hygiene Children who are unable to wash their hands by themselves should be assisted to clean their hands using soap and water or a hand sanitiser (if their hands are visibly clean) as outlined previously.

Equipment Some children may have care needs (physical or behavioural) which requires the use of aids and appliances and/or medical equipment for example toileting aids, moving and handling equipment, respiratory equipment. Where cleaning of aids and appliances is carried out in the school it is recommended that a cleaning schedule is provided, detailing when and how the equipment is cleaned and the cleaning products to be used in accordance with the manufacturers' instructions. The following points can guide the development of such cleaning schedule: Equipment used to deliver care should be visibly clean; Care equipment should be cleaned in accordance with the manufacturers' instructions. Cleaning is generally achieved using a general purpose detergent and warm water. Equipment that is used on different children must be cleaned and, if required, disinfected immediately after use and before use by another child e.g. toileting aids; If equipment is soiled with body fluids: First clean thoroughly with detergent and water; Then disinfect by wiping with a freshly prepared solution of disinfectant; Rinse with water and dry.

Specific Advice relating to the work of SNAs in close contact settings and mitigation measures to be observed in those settings

Specific advice has been provided by the HPSC for the work of SNAs (updated January 2021) and it is intended that while directed to SNAs it can also be applicable to all school staff who work delivering personal care or attention within 2metres to a pupil. This advice does not materially differ to the original guidance issued in June 2020 but as it is recently provided by HPSC with a particular focus on special education settings, it is set out below.

It notes that the "guidance is not a rulebook that must be followed to the letter. The appropriate use of this guidance requires the use of compassion and good sense and a reasonable judgment of the level of risk in most situations. If the general principles of this guidance are implemented, the risk that any given pupil or staff member in the educational setting on any given day has infectious

COVID-19 is very low. All additional measures are applied as practical to the context with a view to further lowering the risk of transmission to staff or pupils in the event that a person with infectious COVID-19 is at school”.

The guidance goes on to say: The role of the Special Needs Assistant and Associated Risks of COVID-19 People living with certain disabilities associated with increased medical vulnerability may be disproportionately affected by COVID-19. The measures taken to control the spread of COVID-19 can also have a very serious impact on people with disability. Some disabled children and young people have additional care needs that must be met to support them in achieving their full potential. Children have a right to education and ensuring continued access to education for people living with disability is critical to managing the public health emergency in an inclusive way.

Special Needs Assistants play a vital role in supporting the additional care needs of some children and young people.

- Some parts of the work performed by SNAs are similar to tasks performed by healthcare workers and in particular, the nature of the work is such that it is often not possible to maintain distance;
- Some children and young people concerned may display behaviours that are associated with an increased risk of virus transmission if they are infectious;
- Some children and young people concerned may have limited ability to self-report symptoms therefore recognising infection may be more difficult;
- In this context, there is a requirement for specific guidance to support the work of SNAs and any other people who may provide similar support for children and young people with additional care needs.

Transmission

Like other respiratory viruses, the transmission of SARS-CoV-2 occurs mainly through respiratory droplets generated from the mouth and nose of an infected person during activities such as coughing, sneezing, talking or laughing. The droplets may carry virus directly to the mouth, nose and eyes of person standing nearby or may land on a nearby surface. Under certain circumstances, airborne transmission may occur (such as when aerosol generating procedures are conducted in health care settings or potentially, in indoor crowded poorly ventilated settings elsewhere). In general, higher levels of virus are present around the time of first onset of symptoms. Some people who never notice any symptoms may be infectious to others (asymptomatic transmission). Recognising infection is likely to be more difficult in people who are not able to describe their symptoms or communicate easily that they feel unwell however parents, SNAs, teachers and others who are very familiar with the baseline function of a child or young person may notice changes that suggest infection and may warrant medical assessment. Virus can remain on the surface for some time and be transferred to the mouth, nose and eyes of another person on their hands after they touch the contaminated surface. The virus does not penetrate through the skin.

Survival in the environment

Virus on surfaces is easily removed or with common household cleaning products (detergent) and in those circumstances where disinfection is needed common bleach and a number of other disinfectants are effective

Duration of Infectivity

People may be infectious for up to two days before they develop symptoms (pre-symptomatic transmission). In Ireland, people with COVID-19 are generally considered infectious for up to 10 days after the date of onset of symptoms or for 10 days after the date of their first positive test if the date of onset of symptoms is not clear. A longer period may apply to people who were hospitalised with COVID-19. After 10 days, the person is no longer considered infectious if they have been free of fever for 5 days. Doing another test at the end of the ten days is usually not useful and should only be done if specifically requested by a doctor.

Practical Measures for Harm Reduction Related to COVID-19 when addressing Additional Care Needs in the educational Setting

The following practical measures for preventing harm related to COVID-19 when addressing additional care needs in the education setting are organised under 3 main headings, reducing the risk of introduction of COVID-19, reducing the risk of spread of COVID-19 and reducing the impact of COVID-19 infection if it occurs.

Reducing the risk of introduction of COVID-19 into the Educational Setting

The virus that causes COVID-19 cannot spread in any setting unless it is introduced. Although there is significant anxiety about introduction of virus on objects in practice the virus is essentially always introduced by a person who is infectious and is shedding the virus. Although some people with no signs or symptoms can be infectious, people are generally most infectious for others when they have symptoms and signs of infection.

1. School staff should be familiar with the main symptoms and signs of COVID-19 (see above) so that they may be able to recognise if a pupil develops obvious signs of infection.
2. Pupils (as appropriate to their ability) their parents, guardians and families should be informed of the main symptoms and signs of COVID-19 (see above) so that they may be able to recognise if a pupil develops obvious signs of infection.
3. School staff as well as pupils (as appropriate to their ability), their parents, guardians and families should be aware that they must not attend school or training if they have symptoms or signs that may suggest COVID-19 until they have taken appropriate medical advice and testing if appropriate. They should be aware that they should not attend school or training if they have been told they are close contacts of a person with COVID-19. These messages should be reinforced regularly.

4. School staff as well as pupils (as appropriate to their ability), their parents, guardians and families should be aware of the general advice they should follow outside of the educational setting to lower the risk that they become infected with COVID-19.

5. Limiting the number of people entering the educational/training setting to those essential to provide the service reduces risk of introduction of the virus.

6. Staff should be alert for any signs of illness that suggest that they, a pupil or a colleague may have COVID-19 on arrival for school and throughout the day.

Reducing the risk of spread of COVID-19 in the Educational Setting

If the virus is introduced into an educational setting, the highest risk of spread is related to close contact with an infectious person or their immediate surroundings. Therefore the most important measures to reduce the risk of spread are doing all that is practical to limit the degree to which different groups of people within the education/training setting mix and interact with other groups. This is especially the case indoors. It is recognised that there are practical considerations that must be taken into account when it is necessary for an SNA to support multiple students across different settings in the course of a working day. It is also the case that some children will need to move from their special class into a mainstream class during the day to ensure that their integration needs for educational purposes are addressed. As below, where movement is necessary the risk can be reduced by hygiene measures. The risk of spread can also be reduced to some degree by the highest practical standard of personal and environmental hygiene. In the context of COVID-19, the risk is associated with droplets and fluids from the respiratory tract. There is very little risk of spread of COVID-19 from other body fluids (such as urine and faeces) although they may carry other infectious microorganisms.

Reducing Mixing Between Groups

1. To the greatest degree that is practical in the context of the educational and care needs of the pupils groups/classes should avoid mixing with other groups particularly indoors.

2. SNA should support the smallest number of pupils that is practical (a pod of pupils) and should move between pods as little as is practical to do so recognising that flexibility is sometime essential to manage absence due to leave or illness.

3. If movement between pods/classes is necessary SNAs should move between the least possible number of pods/classes on any given day.

4. If members of discrete pods/classes assemble in one area for meals or other activities maintain as much distance as is practical between the pods/classes and manage entry and exit to reduce interaction between members of different pods/classes as much as is practical.

Promoting Key-Behaviours that Reduces risk of Person to Person Spread

1. Promote hand hygiene for staff and pupils particularly on boarding a bus if there is shared transport, on arrival at the school/centre each day, prior to departure, before meals and after any contact with the pupil that is likely to have resulted in contact with oral or nasal fluid.
2. There should be ready access to hand sanitiser in all educational settings with due regard in relation to placement to avoid the risk of ingestion by pupils. Please note also that alcohol based hand rub is flammable and needs to be kept away from naked flame.
3. Providing SNAs with personal pocket size dispensers of alcohol hand gel may be useful, particularly if wall mounted dispensers are not a safe option in a particular context and also for use during outdoor activities.
4. Promote respiratory hygiene and cough etiquette to the greatest extent possible.
5. Support in performing hand hygiene should be provided to pupils who need assistance.
6. Limit sharing of items between members of the pod in so far as is practical especially with respect to items that pupils may put in their mouth.

Environment and cleaning

1. The educational environment should provide discrete rooms for each group to the greatest degree practical and be as spacious as is practical with as much natural ventilation as practical.
2. Surfaces should be easy to clean.
3. Outdoor activity is associated with lower risk and should be encouraged where appropriate and weather permits.
4. The highest practical standards of general hygiene should be maintained.
5. The floors, tables, chairs and other items should be easily cleanable and cleaned at least daily.
6. All frequently touched surfaces should be cleaned at the end of the day or end of each session (e.g. prior to and immediately after each session if more than one session with different learners is taking place in one day).
7. Separate colour coded cleaning cloths and cleaning equipment should be used for kitchen areas, classrooms and toilets. Each Classroom / Area should have their own set of cloths
8. Cleaning cloths can be reusable. Reusable cloths should be laundered daily on a hot wash cycle (at least 60°C) in a washing machine and then tumble dried.
9. Ideally, mop heads should be removed and washed in the washing machine at 60°C at the end of each day or in accordance with the manufacturer's instructions.

7. Cleaning is generally with water and detergent or detergent wipes. If disinfection is required in specific circumstances then this is always in addition to and never instead of cleaning.

8. Waste bins should be emptied on a daily basis.

Cleaning/disinfecting rooms where a child or staff member with suspected or confirmed COVID-19 was present

1. Once the room is vacated, the room should not be reused until the room has been thoroughly cleaned and disinfected and all surfaces are dry.

2. The person assigned to clean the area should avoid touching their face while they are cleaning and should wear household or disposable single use non-sterile nitrile gloves and a disposable plastic apron (if one is available).

3. Clean the environment and the furniture using disposable cleaning cloths and a household detergent followed by disinfection with a chlorine based product

4. All personal waste including used tissues and all cleaning waste should be placed in a plastic in rubbish bag.

5. The bag should be tied when it is almost full and then placed into a second bin bag and tied.

6. Once the bag has been tied securely it should be left somewhere safe. The bags should be left for three days before collection by the waste company.

Isolation for people who develop symptoms or signs in the educational setting

1. If anyone develops symptoms or signs that cause concern about COVID-19 during the day the person should move as quickly as possible to a separate room or if that is not possible to a separate area more than 2m away from other people other than the person(s) needed to provide support until they can leave.

2. The parents/guardian should be telephoned to come and take the pupil home as soon as is reasonably practical. This needs to be done reasonably promptly but this is not an emergency. It is important that parents and guardians do not expose themselves and others to other risks (for example road traffic accident) on the understanding that this is an emergency.

3. Parents/guardian should take medical advice regarding the requirement for testing and the duration of exclusion from education.

4. There is no requirement for other pupils or school staffs to interrupt their scheduled activity immediately if one person develops symptoms.

5. Contact surfaces in the immediate vicinity of the person with symptoms should be cleaned/wiped down.

6. The person accompanying a pupil waiting to be collected should limit physical contact as much as is practical consistent with the pupil's needs and should use a surgical mask, visor and nitrile gloves. Hand hygiene must be performed after removal of gloves.
7. When the pupil is collected, the accompanying person can resume work with other pupils after removing used PPE and performing hand hygiene.
8. It is not appropriate to require certification from a doctor before the pupil returns to education. There is a certificate that parents can be asked to complete on hpsc.ie website.

Reducing the Impact of COVID-19 Infection

It is likely that COVID-19 infection will impact on some pupils and SNAs during the coming school year as a result of infection acquired in everyday life or in the educational setting. The likelihood of suffering serious harm as a result of COVID-19 infection depends on the age and general health of the person when they became infected and on access to healthcare if they need it.

1. Maintaining a healthy lifestyle (exercise, nutrition, avoiding exposure to smoke) and good care of any existing medical conditions improves the likelihood of making a good recovery from COVID-19.
2. Early access to appropriate medical care, if required, is important in recovery from COVID-19. All pupils and school staffs should be registered with a GP to provide care if required.

Induction Training

All staff of Grace Park ETNS will undertake and complete COVID-19 Induction Training prior to returning to the school building. The aim of such training is to ensure that staff have full knowledge and understanding of the following:

- latest up to-date advice and guidance on public health
- COVID-19 symptoms
- what to do if a staff member or pupil develops symptoms of COVID-19 while at school
- outline of the COVID-19 response plan

Staff will be kept fully informed of the control measures in place in the school and their duties and responsibilities in preventing the spread of COVID-19 and will be updated with any changes to the control measures or guidance available from the public health authorities.

If a staff member is unsure about any aspect of the COVID-19 Response Plan, the associated control measures, or his/her duties, he/she should immediately seek guidance

from the Principal, who is supported in this role by the Board of Management of Grace Park ETNS.

A national information campaign to support parents and pupils will happen in advance of schools reopening on issues such as COVID-19 awareness and to help minimise the risk of introduction and spread of the virus in schools.

Procedure Returning to Work (RTW)

In order to return to the workplace, staff of Grace Park ETNS must complete a Return to Work (RTW) form which is available from the office/principal. A RTW form should be completed (in writing) and returned 3 days before returning to work.

The principal will also provide details of the Induction Training for completion by staff and details of any additional health and safety measures in place in the school to facilitate the staff member's return to the school facility.

There are some school staff who may be unable to return to school. Current public health guidelines have identified these people as being in groups who are defined as being at very high risk. This will be updated in line with public health advice.

People at very high risk (extremely vulnerable)

[Guidance from the HSE for people at very high risk \(extremely vulnerable\) is available here.](#)

The list of people in very high risk groups include people who:

- are over 70 years of age - even if fit and well
- have had an organ transplant
- are undergoing active chemotherapy for cancer
- are having radical radiotherapy for lung cancer
- have cancers of the blood or bone marrow such as leukaemia, lymphoma or myeloma who are at any stage of treatment
- are having immunotherapy or other continuing antibody treatments for cancer
- are having other targeted cancer treatments which can affect the immune system, such as protein kinase inhibitors or PARP inhibitors
- have had bone marrow or stem cell transplants in the last 6 months, or who are still taking immunosuppression drugs
- have severe respiratory conditions including cystic fibrosis, severe asthma, pulmonary fibrosis, lung fibrosis, interstitial lung disease and severe COPD

- have a condition that means they have a very high risk of getting infections (such as SCID, homozygous sickle cell)
- are taking medicine that makes you much more likely to get infections (such as high doses of steroids or immunosuppression therapies)
- have a serious heart condition and are pregnant

Details of the arrangements that will apply for these staff, which will be in accordance with those applying for the public service generally, will be updated by the Department of Education following consultation with management bodies and unions and a circular will issue to all schools.

Lead Worker Representative

The Protocol provides for the appointment of a [Lead Worker Representative \(LWR\)](#) in Grace Park ETNS.

The appointed Lead Worker/Deputy Lead Worker Representatives are:

Lead Worker Representative: Sylvia McLoughlin (Secretary)

Deputy Lead Worker Representative: Liana Cassin (SET)

The Lead Worker Representative will work in collaboration with the employer to assist in the implementation of measures to prevent the spread of COVID -19 and monitor adherence to those measures and to be involved in communicating the health advice around COVID-19 in the workplace.

This section sets out how the provisions will operate in schools. The process for appointment of the lead worker representative in schools has been agreed centrally between the Department of Education and the education partners.

Responsibility for the development and implementation of the COVID-19 Response Plan and the associated control measures lies primarily with the Board of Management of Grace Park ETNS and school management.

Strong communication and a shared collaborative approach is key to protecting against the spread of COVID-19 in schools, and looking after the health, safety and wellbeing of staff and students. Adherence to the [Return to Work Safely Protocol](#) will only be achieved if everyone has a shared responsibility in implementing the measures contained within the Protocol in their place of work.

If a staff member has any concerns or observations in relation to the COVID-19 Response Plan, control measures or the adherence to such measures by staff, pupils or others, he or she should contact the lead worker who will engage with the principal or Board of Management.

Role of the Lead Worker Representative

In summary, the role of the Lead Worker Representative is to:

- represent all staff in the workplace regardless of role, and be aware of specific issues that may arise in respect of different staff cohorts
- work collaboratively with school management to ensure, so far as is reasonably practicable, the safety, health and welfare of employees in relation to COVID-19
- keep up to date with the latest COVID-19 public health advice
- In conjunction with school management, promote good hygiene practices such as washing hands regularly and maintaining good respiratory etiquette along with maintaining social distancing in accordance with public health advice
- assist school management with the implementation of measures to suppress COVID-19 in the workplace in line with the Return to Work Safely Protocol and current public health advice
- in conjunction with school management, monitor adherence to measures put in place to prevent the spread of COVID-19
- conduct regular reviews of safety measures
- report any issues of concern immediately to school management and keep records of such issues and actions taken to rectify them

- consult with the school management on the school's COVID-19 Response Plan in the event of someone developing COVID-19 while in school including the location of an isolation area and a safe route to that area
- following any incident, assess with the school management any follow up action that is required
- consult with colleagues on matters relating to COVID-19 in the workplace
- make representations to school management on behalf of their colleagues on matters relating to COVID-19 in the workplace

Grace Park ETNS has appointed a Lead Worker Representative (*Sylvia Mc Loughlin*) and a Deputy Lead Work Representative (*Liana Cassin*). The role of the Deputy LWR will be to deputise as LWR where the LWR is absent.

All staff, pupils, parents, contractors and visitors have a responsibility both as individuals and collectively to have due regard for their own health and safety and that of others and to assist with the implementation of the COVID-19 Response Plan and associated control measures.

Signage

Grace Park ETNS will be required to display signage outlining the signs and symptoms of COVID-19 and to support good hand and respiratory hygiene.

Printed posters will be displayed around the school, with age appropriate key health messages – hand washing, sneeze and cough etiquette and social distancing.

Grace Park ETNS will display the posters in prominent areas such as on school grounds, in offices, corridors, staffroom area, classrooms and toilets.

Making Changes to School Layout

Maintaining physical distancing in the school environment is recommended as one of the key control measures to minimize the risk of the introduction and spread of COVID-19.

Grace Park ETNS will reconfigure classrooms and other areas as necessary to support physical distancing in line with the guidance in advance of school reopening.

Health and Safety Risk Assessment

COVID-19 represents a hazard in the context of health and safety in the school environment. Grace Park ETNS will follow the Risk Assessment template provided by the Department of Education and Skills to identify the control measures required to mitigate the risk of Covid 19 at Grace Park ETNS.

Grace Park ETNS will review their emergency procedures involving fire safety, first aid, accidents and dangerous occurrences to consider any new risks that arise due to the school's COVID-19 Response Plan. Any changes to the school's existing emergency procedures should be documented and incorporated into the school's safety statement.

Grace Park ETNS will review their existing risk assessments to consider any new risks that arise due to the school's COVID-19 Response Plan. Any changes to the school's current risk assessments should also be documented and incorporated into the school safety statement.

First Aid/Emergency Procedure

The standard First Aid/emergency procedure shall continue to apply in Grace Park ETNS and in accordance with Covid-19 safety guidelines. In an emergency or in case of a serious incident, schools should call for an ambulance or the fire brigade on 112/999 giving details of location and type of medical incident.

Access to School and Contact Log

Access to the school building will be in line with agreed school procedures.

Visitors to Grace Park ETNS such as contractors and parents will be restricted to essential purposes and limited to those who have obtained prior approval from the principal **by appointment only**. The Department of Education Inspectorate may also need to visit schools and centres for education to support them as appropriate in the implementation of public health advice relating to creating a safe learning and working environment for all.

The prompt identification and isolation of potentially infectious individuals is a crucial step in restricting the spread of the virus and protecting the health and safety of the individuals

themselves and other staff, contractors and visitors at Grace Park ETNS. A detailed sign in/sign out log of those entering the school facilities will be maintained.

Grace Park ETNS should maintain a log of staff and pupil contacts.

The Data Protection Commission has provided guidance on the data protection implications of the return to work protocols.

Schools are reminded that all school records and data must be maintained and processed in compliance with the GDPR and the Data Protection Acts. The responsibility for compliance with the legislation rests with each school (or ETB) in their role as data controller.

Control Measures:

One of the key messages to manage the risks of COVID-19 is to do everything practical to avoid the introduction of COVID-19 into the school. If infection is not introduced it cannot be spread.

A range of essential control measures have been implemented to reduce the risk of the spread of COVID-19 virus and to protect the safety, health and welfare of staff, pupils, parents and visitors as far as possible within the school. The control measures shall continue to be reviewed and updated as required on an ongoing basis.

It is critical that staff, pupils, parents and visitors are aware of, and adhere to, the control measures outlined and that they fully cooperate with all health and safety requirements.

How to Minimise the Risk of Introduction of COVID-19 into Schools:

- promote awareness of [COVID-19 symptoms](#)
- advise staff and pupils that have symptoms not to attend school, to phone their doctor and to follow HSE guidance on self-isolation
- advise staff and pupils not to attend school if they have been identified by the HSE as a contact for person with COVID-19 and to follow the HSE advice on restriction of movement
- advise staff and pupils that develop symptoms at school to bring this to the attention of the Principal promptly
- ensure that staff and pupils know the [protocol for managing a suspected case of COVID-19 in school](#)
- everyone entering the school building needs to perform hand hygiene with a hand sanitiser

- visitors to the school during the day should be by prior arrangement and should be received at a specific contact point
- physical distancing (of 2 metres) should be maintained between staff and visitors where possible

Know the Symptoms of COVID-19

In order to prevent the spread of COVID-19 it is important to know and recognise the symptoms. [Full guidance on COVID-19 symptoms is available from the HSE](#) but they include:

- fever or high temperature
- cough
- shortness of breath or breathing difficulties
- loss of smell, of taste or distortion of taste

Respiratory Hygiene

Make sure you, and the people around you, follow good respiratory hygiene. This means covering your mouth and nose with a tissue or your bent elbow when you cough or sneeze. Then dispose of the used tissue immediately and safely into a nearby bin.

By following good respiratory hygiene, you protect the people around you from viruses such as cold, flu and COVID-19.

Hand Hygiene

Staff and pupils should understand why hand hygiene is important as well as when and how to wash their hands.

Grace Park ETNS will promote good hygiene and display posters throughout the school on how to wash your hands. Hand hygiene can be achieved by hand washing or use of a hand sanitiser and Grace Park ETNS will provide hand soap and hand sanitisers throughout the school. Alcohol based sanitizer must not be stored or used near heat or naked flame.

Ventilation

The Department has published guidance setting out the practical steps for good ventilation in accordance with public health advice 'Practical Steps for the Deployment of Good Ventilation Practices in Schools' The guidance sets out an overall approach for schools that windows should be open as fully as possible when classrooms are not in use

(e.g. during break-times or lunch-times (assuming not in use) and also at the end of each school day) and partially open when classrooms are in use. The guidance 2 provides that good ventilation can be achieved in classrooms without causing discomfort, particularly during cold weather.

Frequency of Hand Hygiene

Pupils and staff should perform hand hygiene:

- on arrival at school
- before eating or drinking
- after using the toilet
- after playing outdoors
- when their hands are physically dirty
- when they cough or sneeze

Physical Distancing

Physical distancing can be usefully applied in primary and special school settings allowing for some flexibility when needed. It must be applied in a practical way to recognise that the learning environment cannot be dominated by a potentially counterproductive focus on this issue. Physical distancing will look different across the various ages and stages of learning. Care should be taken to avoid generating tension or potential conflict and some flexibility in the implementation of measures may be required at times.

It is also recognised that it is not always possible for staff to maintain physical distance from pupils and it is not appropriate that they would always be expected to do so where this could have a detrimental impact on the pupil i.e. if a child sustains an injury and requires first aid.

However, where possible staff should maintain a minimum of 1 metre distance and where possible 2 metres. They should also take measures to avoid close contact at face to face level such as remaining standing rather than sitting beside/crouching down.

The guidelines provided by the Department of Education on optimal school layout and should be used by schools to increase separation to the greatest degree possible.

To maintain physical distancing in the classroom, primary schools and special schools should:

- reconfigure class spaces to maximise physical distancing

- utilise and reconfigure all available space in the school in order to maximise physical distancing
- the room is clear of any unnecessary furniture/shelves and so on, on the walls
- a variety of classroom sizes

The teacher's desk should be at least 1 metre and where possible 2 metres away from pupil desks.

In primary and special schools a distance of 1 metre should be maintained between desks or between individual pupils. It is recognised that younger children are unlikely to maintain physical distancing indoors. Therefore achieving this recommendation in the first four years of primary or special schools, is not a prerequisite to reopening a primary or special school for all pupils.

Where possible work stations should be allocated consistently to the same staff and children rather than having spaces which are shared.

The risk of infection may be reduced by structuring pupils and their teachers into Class Bubbles (that is, a class grouping which stays apart from other classes as much as possible) and discrete groups or "Pods" within those class bubbles, to the extent that this is practical.

If the class is divided into Pods, there should be at least (1 metre distance) between individual Pods within the Class Bubble and between individuals in the pod, whenever possible.

Pod sizes should be kept as small as is likely to be reasonably practical in the specific classroom context.

To the greatest extent possible, pupils and teaching staff should consistently be in the same Class Bubbles although this will not be possible at all times.

Different Class Bubbles should where possible have separate breaks and meal times or separate areas at break or meal times (or this could be different class years, that is 2nd class, 3rd class and so on).

Sharing educational material between Pods should be avoided/minimised where possible.

Staff members who move from class bubble to class bubble should be limited as much as possible.

Additional measures to decrease interaction include:

- limit interaction on arrival and departure and in hallways and other shared areas
- social physical contact (hand to hand greetings, hugs) should be discouraged
- where pupils need to move about within the classroom to perform activities (access to a shared resource) it should be organised to the greatest degree possible to minimise congregation at the shared resource
- staff and pupils should avoid sharing of personal items
- encourage pupils to avoid behaviours that involve hand to mouth contact (putting pens/pencils in the mouth)
- where teaching and learning involves use of keyboards or tablets, the contact surface of the device should be cleaned regularly and hand hygiene encouraged

School drop off/collection

- Arrangements for dropping off/collecting pupils is arranged and Grace Park ETNS encourages physical distancing of 2 metres where possible.
- Walking/cycling to school is encouraged as much as possible.
- Arrangements are made to maintain a distance of 2 metres between parents and guardians and between parents and guardians and school staff.
- Arrangements are put in place to avoid congregation of people at the school gates where physical distancing may not be respected.
- Staggered drop off/pick up times are put in place where practical and feasible.

Staff

A distance of 2 metres is recommended for physical distancing by staff. This is particularly relevant to distancing between adults when they are not engaged in teaching such as the staff room and arriving to work.

- If 2m cannot be maintained in staff groups, as much distance as is possible and updated guidance on face covering should be observed.
- Physical distancing should be observed between staff members within the staff room through the use of staggered breaks and so on.
- Staff meetings should be held remotely or in small groups or in large spaces to facilitate physical distancing.
- Implement a no hand-shaking policy.
- Minimise gathering of school staff at the beginning or end of the school day.
- Staff can rotate between areas/classes but this should be minimised where possible.

Yard/Supervision

The risk of transmission from contact with outside surfaces or play areas is low.

- Adjust play time/outdoor activities to minimise crowding at the entrance and exits.
- It is not possible to maintain physical distancing when pupils in primary or special schools play together outdoors, but in so far as practical it is helpful to keep to consistent groups.
- Stagger break times and outdoor access.
- Children should be encouraged to perform hand hygiene before and after outdoor activities.
- Minimise equipment sharing and clean shared equipment between uses by different people.

Use of PPE in Schools

The Department has published Guidance to Primary and Special Schools on PPE consumables and equipment . This provides schools with the information needed on the appropriate quantities of PPE consumables and equipment to support the full and safe reopening of schools.

The updated advice from the HPSC to the Department of Education has recommended that face coverings should be worn by staff members where it is not possible to maintain a physical distance of 2 metres from other staff, parents, essential visitors or pupils. The Department has accepted this recommendation. Accordingly, it is now a requirement for face coverings to be worn by staff members where it is not possible to maintain a physical distance of 2 metres from other staff, parents, essential visitors or pupils. Schools must provide medical grade masks in the EN16483 category to all SNAs and those staff by necessity that need to be in close and continued proximity with pupils with care needs.

PPE will also need to be used at certain work activities or work areas. These might include roles such as:

- performing intimate care
- where a suspected case of COVID-19 is identified while the school is in operation
- where staff are particularly vulnerable to infection but are not on the list of those categorised as people in very high risk groups, or may be living with people who are in a very high risk category
- administering first aid
- parent teacher meetings

Where staff provide healthcare to children with medical needs in the school environment they should apply standard precautions as per usual practice.

Personal Protective Equipment (PPE)

1. Personal protective equipment in the setting of COVID refers to items that are used to reduce the risk of infection in particular settings.
2. PPE can be of value as an addition to all the other measures outlined here to reduce the risk of infection for SNAs.
3. As with all children, pupils with additional care needs should not be required to wear a face covering if they are under 13 years of age. Those who choose to wear a face covering may do so.
4. Pupils with additional care needs who are 13 years or older should not be required to wear a face covering if the face covering causes distress or is a barrier to their education and care needs.
5. In this context and in association with other measures specified the use of a face covering should be routine for SNAs in accordance with Government guidance.
6. When SNAs are within 2m of a pupil and to whom they are delivering personal care or attention for a period of time the face covering should normally be a surgical mask. If surgical masks are not available a cloth face covering should be used. If for any reason use of a surgical mask or cloth face covering is not practical for any reason, they should use a visor of a quality suitable for use in a healthcare setting however HPSC advice is that a visor does not provide protection equivalent to a mask.
7. Masks and visors should be donned and doffed and disposed of as demonstrated in videos available at <https://www.hpsc.ie/az/respiratory/coronavirus/novelcoronavirus/guidance/infectionpreventionandcontrolguidance/ppe/>. Masks should be removed and disposed of if they are wet or damaged. Masks should be removed and disposed of if going on a break or visiting the toilet.
8. Gloves and aprons should not be used routinely in the educational setting.
9. If providing care that involves specific risk of exposure to blood or body fluids (oral fluids, faeces, urine) use of gloves and a disposable plastic apron is appropriate. These must be removed and disposed of safely and hand hygiene performed after caring for each individual. Note with respect to faeces and urine the risk of infection is related to other infectious organisms rather than COVID-19.

10. Hand hygiene should be performed before donning and after removing gloves.
11. If providing care that involves a risk of splashing of body fluids a visor is required to protect the eyes from splashing even if already wearing a surgical mask.
12. Used PPE is generally discarded directly into domestic waste.
13. PPE used when attending to a person with suspected COVID-19 while waiting for collection can be placed in a separate plastic bag, which is then placed in domestic waste.

Face Coverings/Face Visors/Masks

It is now a requirement for face coverings to be worn by staff members where it is not possible to maintain a physical distance of 2 metres from other staff, parents, essential visitors or pupils.

In certain situations the use of clear visors should be considered, for example staff interacting with pupils with hearing difficulties or learning difficulties.

Cloth face coverings should not be worn by any of the following groups:

- primary school children
- any person with difficulty breathing
- any person who is unconscious or incapacitated
- any person who is unable to remove the face-covering without assistance
- any person who has special needs and who may feel upset or very uncomfortable wearing the face covering, for example persons with intellectual or developmental disabilities, mental health conditions, sensory concerns or tactile sensitivity.

All staff wearing face coverings should be reminded to not touch the face covering and to wash or sanitise their hands (using hand sanitiser) before putting on and after taking off the face covering.

Information should be provided on the proper use, removal, and washing of cloth face coverings, see [Guidance on safe use of face coverings](#).

Gloves

The use of disposable gloves in the school by pupils or staff is not generally appropriate but may be necessary for cleaning, intimate care settings and when administering first aid.

Routine use does not protect the wearer and may expose others to risk from contaminated gloves.

Routine use of disposable gloves is not a substitute for hand hygiene.

Aprons

Aprons may also be appropriate in certain circumstances including for intimate care needs or for staff assigned to cleaning an area where a suspected or confirmed case of COVID-19 was present.

Impact of COVID-19 on certain school activities

The department will work with stakeholders to provide more detailed advice on certain schools activities in advance of school reopening.

Choir/Music Performance

Choir practices/performances and music practices/performances involving wind instruments may pose a higher level of risk and special consideration should be given to how they are held ensuring that the room is well-ventilated and the distance between performers is maintained.

Sport Activities

Schools should refer to the [HSPC guidance on return to sport](#).

Shared Equipment Toys

All toys should be cleaned on a regular basis (weekly, for example). This will remove dust and dirt that can harbour germs.

Toys that are visibly dirty or contaminated with blood or bodily fluids should be taken out of use immediately for cleaning or disposal.

When purchasing toys choose ones that are easy to clean and disinfect (when necessary).

If cloth or soft toys are used they should be machine washable.

Jigsaws, puzzles and toys that young pupils to those with special educational needs may be inclined to put into their mouths should be capable of being washed and disinfected.

All play equipment should be checked for signs of damage for example breaks or cracks. If they cannot be repaired or cleaned they should be discarded.

Clean toys and equipment should be stored in a clean container or clean cupboard. The manufacturer's instructions should always be followed.

At this time soft modelling materials and play dough where used should be for individual use only.

Cleaning Procedure for Toys

- wash the toy in warm soapy water, using a brush to get into crevices
- rinse the toy in clean water
- thoroughly dry the toy
- some hard plastic toys may be suitable for cleaning in the dishwasher
- toys that cannot be immersed in water that is electronic or wind up should be wiped with a damp cloth and dried
- in some situations toys/equipment may need to be disinfected following cleaning for example: toys/equipment that pupils place in their mouths. Toys/equipment that have been soiled with blood or body fluids or toys where a case of COVID-19 has been identified

If disinfection is required: A chlorine releasing disinfectant should be used diluted to a concentration of 1,000ppm available chlorine. The item should be rinsed and dried thoroughly.

Art

Where possible pupils should be encouraged to have their own individual art and equipment supplies.

Electronics

Shared electronic devices such as tablets, touch screens, keyboards should be cleaned between use and consideration could be given to the use of wipeable covers for electronics to facilitate cleaning.

Musical Equipment/Instruments

To the greatest extent possible, instruments should not be shared between pupils and if sharing is required, the instruments should be cleaned between uses.

Library Policy

Where practical pupils should have their own books. Textbooks that are shared should be covered in a wipeable plastic covering that can be wiped with a suitable household cleaning agent between uses. Pupils should be encouraged to perform hand hygiene after using any shared item.

Shared Sports Equipment

Minimise equipment sharing and clean shared equipment between uses by different people.

Hygiene and Cleaning in Schools

The specific advice in relation to school cleaning is set out in the [HSPC health advice for schools](#) and will be covered in the induction training. This advice sets out the cleaning regime required to support schools to prevent COVID-19 infections and the enhanced cleaning required in the event of a suspected cases of COVID-19. Schools are asked to carefully read and understand the cleaning advice and to apply that to all areas of the school as appropriate.

Schools are reminded to take particular care of the hygiene arrangements for hand washing and toilet facilities.

In summary, each school setting should be cleaned at least once per day. Additional cleaning if available should be focused on frequently touched surfaces – door handles, hand rails, chairs/arm rests, communal eating areas, sink and toilet facilities.

All staff will have access to cleaning products and will be required to maintain cleanliness of their own work area. Under no circumstances should these cleaning materials be removed from the building.

Staff should thoroughly clean and disinfect their work area before and after use each day.

There should be regular collection of used waste disposal bags from offices and other areas within the school facility.

Shower facilities shall not be available for use by staff or pupils due to the increased risk associated with communal shower facilities and areas. This shall be reviewed in line with government guidance.

Staff must use and clean their own equipment and utensils (cup, cutlery, plate and so on).

Cleaning/Disinfecting rooms where a pupil/staff member with suspected COVID-19 was present

The room should be cleaned as soon as practicably possible.

Once the room is vacated the room should not be reused until the room has been thoroughly cleaned and disinfected and all surfaces are dry.

Disinfection only works on things that are clean. When disinfection is required it is always as well as cleaning.

Person assigned to cleaning should avoid touching their face while they are cleaning and should wear household gloves and a plastic apron.

Clean the environment and furniture using disposable cleaning cloths and a household detergent followed by disinfection with a chlorine based product (household bleach).

Pay special attention to frequently touched surfaces, the back of chairs, couches, door handles and any surfaces that are visibly soiled with body fluids.

Once the room has been cleaned and disinfected and all surfaces are dry, the room can be reused.

If a pupil or staff diagnosed with COVID-19 spent time in a communal area like a canteen, play area or if they used the toilet or bathroom facilities, then the areas should be cleaned with household detergent followed by a disinfectant (as outlined in the [HSPC health advice for schools](#)) as soon as is practically possible.

Dealing with a Suspected Case of COVID-19

Staff or pupils should not attend school if displaying any symptoms of COVID-19. The following outlines how a school should deal with a suspected case that may arise in a school setting.

School staff should be encouraged to download the HSE COVID-19 tracker app to assist Public Health for contact tracing purposes both in and out of the school setting.

A designated isolation area should be identified within the school building. The possibility of having more than one person displaying signs of COVID-19 should be considered and a contingency plan for dealing with additional cases put in place. The designated isolation area should be behind a closed door and away from other staff and pupils.

If a staff member/pupil displays symptoms of COVID-19 while at school the following are the procedures to be implemented:

- if the person with the suspected case is a pupil, the parents/guardians should be contacted immediately
- isolate the person and have a procedure in place to accompany the individual to the designated isolation area via the isolation route, keeping at least 2 metres away from the symptomatic person and also making sure that others maintain a distance of at least 2 metres from the symptomatic person at all times
- the isolation area does not have to be a room but if it is not a room it should be 2 metres away from others in the room
- if it is not possible to maintain a distance of 2 metres a staff member caring for a pupil should wear a face covering or mask. Gloves should not be used as the virus does not pass through skin
- provide a mask for the person presenting with symptoms. He or she should wear the mask if in a common area with other people or while exiting the premises
- assess whether the individual who is displaying symptoms can immediately be directed to go home/be brought home by parents who will call their doctor and continue self-isolation at home
- facilitate the person presenting with symptoms remaining in isolation if they cannot immediately go home and facilitate them calling their doctor. The individual should avoid touching people, surfaces and objects. Advice should be given to the person presenting with symptoms to cover their mouth and nose with the disposable tissue provided when they cough or sneeze and put the tissue in the waste bag provided
- if the person is well enough to go home, arrange for them to be transported home by a family member, as soon as possible and advise them to inform their general practitioner by phone of their symptoms. Public transport of any kind should not be used
- if they are too unwell to go home or advice is required, contact 999 or 112 and inform them that the sick person is a COVID-19 suspect
- carry out an assessment of the incident which will form part of determining follow-up actions and recovery
- [arrange for appropriate cleaning of the isolation area and work areas involved.](#)

The HSE will inform any staff/parents who have come into close contact with a diagnosed case via the contact tracing process. The HSE will contact all relevant persons where a diagnosis of COVID-19 is made. The instructions of the HSE should be followed and staff and pupil confidentiality is essential at all times.

Additional considerations for those with Special Educational Needs

For children with special educational needs (SEN) maintaining physical distancing in many instances will not be practical or appropriate to implement. The focus should therefore be on emphasising that parents/guardians should have a heightened awareness of signs, symptoms or changes in baseline which suggests illness/COVID-19 infection. Where symptoms are present - children should not attend school.

Similarly, staff should be aware of their responsibility not to attend work if they develop signs or symptoms of respiratory illness.

Hand hygiene

Children who are unable to wash their hands by themselves should be assisted to clean their hands using soap and water or a hand sanitiser (if their hands are visibly clean) [as outlined previously](#).

Equipment

Some children may have care needs (physical or behavioural) which requires the use of aids and appliances or medical equipment for example toileting aids, moving and handling equipment, respiratory equipment.

Where cleaning of aids and appliances is carried out in the school it is recommended that a cleaning schedule is provided, detailing when and how the equipment is cleaned and the cleaning products to be used in accordance with the manufacturers' instructions.

The following points can guide the development of such cleaning schedule:

- equipment used to deliver care should be visibly clean
- care equipment should be cleaned in accordance with the manufacturers' instructions. Cleaning is generally achieved using a general purpose detergent and warm water
- equipment that is used on different children must be cleaned and, if required, disinfected immediately after use and before use by another child, for example toileting aids

If equipment is soiled with body fluids:

- first clean thoroughly with detergent and water
- then disinfect by wiping with a freshly prepared solution of disinfectant
- rinse with water and dry

Staff Duties

Staff have a statutory obligation to take reasonable care for their own health and safety and that of their colleagues and other parties. The cooperation and assistance of all staff is essential to reduce the risk of spread of COVID-19 and to protect health and safety as far as possible within the school. All staff have a key role to play.

In this regard and in order to facilitate a safe return to work, these duties include, but are not limited to, the following:

- adhere to the School COVID-19 Response Plan and the control measures outlined
- complete the Return to Work (RTW) form before they return to work
- must inform the principal if there are any other circumstances relating to COVID-19, not included in the form, which may need to be disclosed to facilitate their safe return to the workplace
- must complete COVID-19 Induction Training and any other training required prior to their return to school
- must be aware of, and adhere to, good hygiene and respiratory etiquette practices
- coordinate and work with their colleagues to ensure that physical distancing is maintained
- make themselves aware of the symptoms of COVID-19 and monitor their own wellbeing
- self-isolate at home and contact their GP promptly for further advice if they display any symptoms of COVID-19
- If staff have travelled outside of Ireland, in such instances staff are advised to follow the latest government advice in relation to foreign travel.
- not return to or attend school if they have symptoms of COVID-19 under any circumstances
- if they develop any symptoms of COVID-19 whilst within the school facility, they should adhere to the procedure outlined above
- keep informed of the updated advice of the public health authorities and comply with same

COVID-19 related absence management

The management of a COVID-19 related absence will be managed in line with agreed procedures with the Department of Education.

Employee Assistance and Wellbeing Programme

The department recognises the need for school staff wellbeing and collective self-care. Support for school staff wellbeing will be provided by Department Support Services including the PDST and CSL, as well as by the HSE's Health Promotion Team.

An Occupational Health Strategy is in place as a supportive resource for staff in schools. The aim of the Occupational Health Strategy is to promote the health and wellbeing of employees in the workplace, with a strong focus on prevention.

The Occupational Health Strategy comprises the Employee Assistance Service and the Occupational Health Service. The Employee Assistance Service (EAS) is provided by Spectrum.Life under the logo of 'Wellbeing Together: Folláinne Le Chéile'.

Under the EAS, employees have a dedicated free-phone confidential helpline 1800 411 057 available 24 hours a day, 365 days a year providing advice on a range of issues such as wellbeing, legal, financial, mediation, management support and so on.

Where required, short-term counselling is available to employees and their families (over the age of 18 years and living at home). A bespoke wellbeing portal and app which offers access to podcasts and blogs on topics around wellbeing and mental health, family life, exercise and nutrition is also available. In addition online cognitive behavioural therapy is provided.

As part of the services provided by Spectrum.Life a Mental Health Promotion Manager is available to develop and deliver evidence based mental health and wellbeing initiatives to reduce stigma and improve mental health literacy and to increase engagement with the service. They will also be providing a series of webinars and presentations to promote staff wellbeing in schools as schools reopen and during the upcoming school year.

Appendices (checklists and policies that schools must follow)

1. COVID-19 policy statement
2. Pre-return to work questionnaire
3. Lead Worker Representative
4. Risk Assessment
5. Contact tracing log
6. Management checklist

7. Dealing with a suspected case of COVID-19
8. Checklist for Lead Worker Representative
9. Checklist for Cleaning

Signed: Ciara Savage (Chairperson)

Date: 11/02/2021

Signed: Caroline Mee (Principal)

Date: 11/02/2021

Updated: 11/03/2021

Appendix 1

Pre-Return to School Questionnaire COVID-19

This questionnaire must be completed by staff at least 3 days in advance of returning to work. If the answer is Yes to any of the below questions, you are advised to seek medical advice before returning to school.

Name: _____

Name of Principal: _____

Date: _____

	Questions	YES	NO
1.	Do you have symptoms of cough, fever, high temperature, sore throat, runny nose, breathlessness or flu like symptoms now or in the past 14 days?		
2.	Have you been diagnosed with confirmed or suspected COVID-19 infection in the last 14 days?		
3.	Have you been advised by the HSE that you are you a close contact of a person who is a confirmed or suspected case of COVID-19 in the past 14 days?		
4.	Have you been advised by a doctor to self-isolate at this time?		
5.	Have you been advised by a doctor to cocoon at this time?		
6. (a)	Have you been advised by your doctor that you are in the very high risk group? If yes, please liaise with your doctor and Principal re return to work.		
(b)	Are you awaiting the results of a COVID-19 test?		

I confirm, to the best of my knowledge that I have no symptoms of COVID-19, am not self-isolating or awaiting results of a COVID-19 test. Please note: The organisation is collecting this sensitive personal data for the purposes of maintaining safety within the workplace in light of the Covid-19 pandemic. The legal basis for collecting this data is based on vital public health interests and maintaining occupational health and will be held securely in line with our retention policy.

Signed: _____

Appendix 2

Lead Worker Representative Checklist

1. Have you agreed with your school to act as a Lead worker representative for your school?
2. Have you been provided with information and training in relation to the role of lead worker representative? (Training for this role is currently being explored with the HSA).
3. Are you keeping up to date with the latest COVID-19 advice from Government?
4. Are you aware of the signs and symptoms of COVID-19?
5. Do you know how the virus is spread?
6. Do you know how to help prevent the spread of COVID-19?
7. Have you watched and do you understand the online Induction Training provided by the Department of Education before returning to school?
8. Are you helping in keeping your fellow workers up to date with the latest COVID-19 advice from Government?
9. Have you completed the COVID-19 return-to-work form and given it to your school? (Department template Return-to-Work form available)
10. Are you aware of the control measures your school has put in place to minimise the risk of you and others being exposed to COVID-19?
11. Did your school consult with you when putting control measures in place? Control measures will be agreed centrally between the Department and education partners. Consultation at school level should take place on any specific local arrangements necessary to implement the protocol
12. Have you a means of regular communication with the person with overall responsibility for the school COVID-19 plan?
13. Are you co-operating with your school to make sure these control measures are maintained?
14. Have you familiarised yourself with the cleaning requirements needed to help prevent cross contamination? (Checklist for Cleaning and Disinfection available)
15. Have you been asked to walk around and check that the control measures are in place and are being maintained?
16. Are you reporting immediately to the person with overall responsibility for the school COVID-19

plan any problems, areas of non-compliance or defects that you see?

17. Are you keeping a record of any problems, areas of non-compliance or defects and what action was taken to remedy the issue?
18. Are you familiar with what to do in the event of someone developing the symptoms of COVID-19 while at school?
19. Are you co-operating with your school in identifying an isolation area and a safe route to that area?
20. Are you helping in the management of someone developing symptoms of COVID-19 while at school?
21. Once the affected person has left the school, are you helping in assessing what follow-up action is needed?
22. Are you helping in maintaining the contact log?
23. Have you been made aware of any changes to the emergency plans or first aid procedures for your school?
24. Are you making yourself available to fellow staff to listen to any COVID-19 control concerns or suggestions they may have?
25. Are you raising those control concerns or suggestions with your school and feeding back the response to the worker who raised the issue?
26. Are you aware of the availability of the Spectrum Life Wellbeing Together Programme?

Appendix 3

Dealing with a Suspected Case of Covid-19 Checklist

Staff members will be required to manage a suspected case in line with the protocol and training. A nominated member of the school management team will be responsible for ensuring that all aspects of the protocol to deal with suspected cases have been adhered to.

Isolation Area

1. Have you identified a place that can be used as an isolation area, preferably with a door that can close?
2. The isolation area does not have to be a separate room but if it is not a room it should be 2m away from others in the room.
3. Is the isolation area accessible, including to staff and pupils with disabilities?
4. Is the route to the isolation area accessible?
5. Have you a contingency plan for dealing with more than one suspected case of COVID-19?
6. Are the following available in the isolation area(s)?
 - Tissues
 - Hand sanitiser
 - Disinfectant/wipes
 - Gloves/Masks
 - Waste Bags
 - Bins

Isolating a Person

7. Are procedures in place to accompany the infected person to the isolation area, along the isolation route with physical distancing from them?
8. Are staff familiar with this procedure?
9. Have others been advised to maintain a distance of at least 2m from the affected person at all times?
(it is intended that this will be dealt with as part of the Department's online training)
10. Is there a disposable mask to wear for the affected person while in the common area and when exiting the building?

Arranging for the affected person to leave the school

11. Staff – have you established by asking them if the staff members feel well enough to travel home?
12. Pupil – have you immediately contacted their parents/guardians and arranged for them to collect their pupil? Under no circumstances can a pupil use public or school transport to travel home if they are a suspected case of COVID-19.

13. The affected person should be advised to avoid touching other people, surfaces and objects.
14. The affected person been advised to cover their mouth and nose with disposable tissue(s) when they cough or sneeze, and to put the tissue in the bin.
15. Has transport home or to an assessment centre been arranged if the affected person has been directed to go there by their GP?
16. Has the affected person been advised not to go to their GP's surgery or any pharmacy or hospital?
17. Has the affected person been advised they must not use public transport?
18. Has the affected person been advised to continue wearing the face mask until the reach home?

Follow up

19. Have you carried out an assessment of the incident to identify any follow-up actions needed?
20. Are you available to provide advice and assistance if contacted by the HSE?

Cleaning

21. Have you taken the isolation area out-of-use until cleaned and disinfected?
22. Have you made arrangements to clean and disinfect any classroom space where the staff or pupils were located?
23. Have you arranged for cleaning and disinfection of the isolation area and any other areas involved, as soon as practical after the affected person has left the building?
24. Have the cleaners been trained in dealing with contaminated areas and supplied with the appropriate PPE?

Appendix 4

School Management Checklist

Composite Checklist for Schools

This checklist supports planning and preparation, control measures and induction needed to support a safe return to school for pupils, staff, parents and others.

For completion by the agreed person with overall responsibility of managing the implementation of the COVID-19 Response plan in line with the supports as agreed with Department of Education.

Planning and Systems

1. Is there a system in place to keep up to date with the latest advice from Government and Department of Education, to ensure that advice is made available in a timely manner to staff and pupils and to adjust your plans and procedures in line with that advice?
2. Has the BoM adopted the DES school COVID-19 response plan and made it available to staff and pupils?
3. Have you a system in place to provide staff and pupils with information and guidance on the measures that have been put in place to help prevent the spread of the virus and what is expected of them?
4. Have you displayed the COVID-19 posters in suitable locations highlighting the signs and symptoms of COVID-19?
5. Have you told staff of the purpose of the COVID-19 contact log?
6. Have you a COVID-19 contact log in place to support HSE tracing efforts if required?
7. Have you informed staff on the measures and provided a system for them to raise issues or concerns and to have them responded to?
8. Have you reviewed and updated risk assessments in line with DES advice to take account of any controls to help prevent the spread of COVID-19?
9. Have you updated emergency plans, if necessary to take account of the COVID-19 response plan?

Staff

10.

(A) A pre- return to work form should be completed and returned to the school within 3 working days before returning to school. The school will request staff (in writing) to confirm that the details in the pre-return to work form remain unchanged following subsequent periods of closure such as school holidays.

(B) Have you requested confirmation that the details in the pre-return to work form remain unchanged following periods of closure such as school holidays.

(C) Have you advised staff and pupils not to return to or attend school if they are identified by the HSE as a close contact of a confirmed case of COVID-19 or if they live with someone who has symptoms of the virus.

(D) Have you advised staff and pupils not to return or attend school if they have travelled outside of Ireland; in such instances staff are advised to consult and follow latest Government advice in relation to foreign travel

(E) Have you advised staff and pupils to cooperate with any public health officials and the school for contact tracing purposes and follow any public health advice in the event of a case or outbreak in the school;

11. Are you aware of staff members who are at very high risk under the HSE guidance on people most at risk (HSE guidance on people most at-risk) and advised them of the DES agreed arrangements for management of those staff?
12. Have you advised staff and pupils they must stay at home if sick or if they have any symptoms of COVID-19?
13. Have you told staff and pupils what to do and what to expect if they start to develop symptoms of COVID-19 in school, including where the isolation area is?
14. Have you advised staff of the availability of the supports of the occupational health and wellbeing programme through Spectrum Life?
15. Has a lead worker representative been identified (in line with the process agreed with the DES and education partners) and detailed at Section 4.3 of this plan to help advise staff and to monitor compliance with COVID-19 control measures in the school and taken measures to ensure all staff know who the representative is?

Training and Induction

16. Have you advised staff to view the Department of Education's training materials which are available online?
17. Have you taken the necessary steps to update your school induction / familiarisation training to include any additional information relating to COVID-19 for your school?
18. Have first aiders, if available, been given updated training on infection prevention and control re: hand hygiene and use of PPE as appropriate? *(It is intended that training will be provided as part of the Department's online training programme).*

Buildings / Equipment

19. If you have mechanical ventilation does it need cleaning or maintenance before the school reopens?
20. Does your water system need flushing at outlets following low usage to prevent Legionnaire's Disease?

21. Have you visually checked, or had someone check, all equipment in the school for signs of deterioration or damage before being used again?
22. Have you arranged for the school, including all equipment, desks, benches, doors and frequent touched surfaces points, to be cleaned before reopening?

Control Measures in place - *Hand / respiratory hygiene*

23. Have you accessed supplies of hand sanitisers and any necessary PPE equipment in line with the interim HPSC health guidance relating to the reopening of schools, from the national framework provided by the Department? (RFI published and framework available from early August).
24. Are there hand washing/hand sanitising stations in place to accommodate staff, pupils and visitors adhering to hand hygiene measures in accordance with Department guidance?
25. Have arrangements been made for staff and pupils to have regular access to handwashing/hand sanitising facilities as appropriate?
26. Are hand sanitisers easily available and accessible for all staff, pupils and visitors – e.g. in each classroom and at entry and exit points to school buildings?
27. Have you made arrangements to ensure hand hygiene facilities are regularly checked and well-stocked?
28. Does the alcohol-based hand sanitiser have at least 60% ethanol or 70% isopropanol as the active ingredient?
29. Have you informed staff about the importance of hand washing?
30. Have you arranged for staff to view how to wash their hands (with soap and water for at least 20 seconds) and dry them correctly through the use of the HSE video resource?
31. Have you shown staff and pupils how to use hand sanitiser correctly and where hand sanitising stations are located?
32. Have you displayed posters on how to wash hands correctly in appropriate locations?
33. Have you told staff and pupils when they need to wash their hands or use hand sanitiser?
 - This includes:
 - before and after eating and preparing food
 - after coughing or sneezing
 - after using the toilet
 - where hands are dirty
 - before and after wearing gloves
 - before and after being on public transport
 - before leaving home
 - when arriving/leaving the school /other sites
 - after touching potentially contaminated surfaces

- if in contact with someone displaying any COVID-19 symptoms
34. Have you told staff and pupils of the importance of good respiratory measures to limit the spread of the virus?
- avoid touching the face, eyes, nose and mouth
 - cover coughs and sneezes with an elbow or a tissue
 - dispose of tissues in a covered bin

Physical Distancing:

35. Have you told staff and pupils when they need to wash their hands or use hand sanitiser?
This includes: When entering and exiting vehicles When entering and exiting school buildings
36. Have you advised staff of the Department’s guidance to achieve good ventilation Have you checked any mechanical ventilation systems to ensure an adequate supply of fresh air is used
37. Have you identified all available school space to be used to maximise physical distancing?
38. Have you reviewed the templates provided by the Department of Education which show options for revised layout of school rooms to meet physical distancing requirements?
39. Have you arranged to revise the layout of the rooms and furniture as per the Department guidelines if necessary?
40. Have you arranged in each room that the teacher’s desk should be at least 1m and where possible 2m away from pupil desks?
41. Have you arranged in each room that pupils would be at least 1m away from each other?
42. Have you allocated workstations consistently to the same staff and children rather than having spaces that are shared?
43. Have you structured pupils and their teachers into Class Bubbles (i.e. a class grouping which stays apart from other classes as much as possible) and discrete groups or “Pods” within those class bubbles to the extent that this is practical?
44. If you have divided a class into Pods, have you arranged at least 1m distance between individual Pods within the class bubble and between individuals in the pod, whenever possible?
45. Have you taken steps to limit contact and sharing of common facilities between people in different Class Bubbles (and Pods within those class bubbles) as much as possible?
46. Have you arranged Pod sizes to be as small as it is likely to be reasonably practical in the specific classroom context?
47. Have you arranged to the greatest extent possible for pupils and teaching staff to be consistently in the same Class Bubbles acknowledging that this will not be possible at all times?

48. Have you arranged where possible that different class bubbles to have separate breaks and meal times or separate areas at break or meal times?
49. Have you made arrangements to limit interaction on arrival and departure from school and in other shared areas?
50. Have you encouraged walking or cycling to school as much as possible?
51. Have you made arrangements, in so far as practicable, to open additional access points to school to reduce congestion?
52. Can you provide a one system for entering and exiting the school, where practical?
53. Have you arranged for staff meetings to be held remotely or in small groups or in large spaces to facilitate physical distancing?
54. Have you a system to regularly remind staff and pupils to maintain physical distancing
55. Have you advised staff not to shake hands and to avoid any physical contact?

Visitors to Schools

56. Have you identified the activities that involve interacting with essential visitors to the school, made arrangements to minimise the number of such visitors and put in place measures to prevent physical contact, as far as possible?
57. Are there arrangements in place to inform essential visitors to the school of the measures to help prevent the spread of infection?
58. Have you a system in place for all visitors who do need to come to the school to make appointment, arrange to contact a central point and to record their visit using the contact tracing log?